

Substitute for form 1449/PTO
(Revised 04/2003)

**INFORMATION DISCLOSURE
STATEMENT BY APPLICANT**
(Use as many sheets as necessary)

Sheet 1 of 2

Complete if Known

Application Number 10/647,624
 Filing Date 08/25/2003
 First Named Inventor Kudrus
 Group Art Unit Unknown
 Examiner Name Unknown
 Attorney Docket Number 030563/266982

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| Examiner Initials* | Cite No. | Document Number Number - Kind Code (if known) | Publication Date MM-DD-YYYY | Name of Patentee or Applicant of Cited Document | Pages, Columns, Lines, Where Relevant Passages of Relevant Figures Appear |
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Examiner Signature [Signature]

Date Considered

1/17/2006

*Examiner: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

